

U.S. Department of Justice
United States Marshals ServicePROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America	RECEIVED U.S. MARSHALS SERVICE BUQUERQUE, NEW MEXICO	COURT CASE NUMBER 15cv658 KK/WPL
DEFENDANT \$16,000.00 in Funds, et.al.	2015 AUG -4 PM 2:58	TYPE OF PROCESS Arrest of Property
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285 1
STEPHEN R. KOTZ, AUSA P.O. BOX 607 Albuquerque, NM 87103		Number of parties to be served in this case
		Check for service on U.S.A.

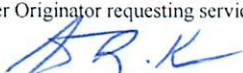
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

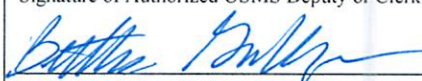
Fold

(1) Execute process by affixing the attached copy of the Verified Complaint for Forfeiture, Notice of Complaint For Forfeiture Against Property and Warrant for Arrest of Property to the Defendant Currency (15-DEA-611284).

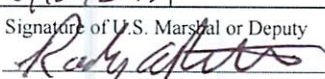
(2) Return completed form for filing.

Signature of Attorney other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 505.346.7274	DATE 8/3/15
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 51	District to Serve No. 51	Signature of Authorized USMS Deputy or Clerk 	Date 8/4/15
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 8/15/2015 Time <input type="checkbox"/> am <input type="checkbox"/> pm Signature of U.S. Marshal or Deputy 

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS:

POSTED TO FILE

DISTRIBUTE TO:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED